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CONFIRMATION NO. 9813

<b>SERIAL NUMBER</b> 10/502,263	<b>FILING OR 371(c) DATE</b> 07/22/2004 <b>RULE</b>	<b>CLASS</b> 324	<b>GROUP ART UNIT</b> 2832	<b>ATTORNEY DOCKET NO.</b> PHDE020020US
<b>APPLICANTS</b> Volkmar Schulz, Hamburg, GERMANY; Bernhard Gleich, Hamburg, GERMANY; Jurgen Weizenecker, Norderstedt, GERMANY;				
<b>** CONTINUING DATA *****</b> This application is a 371 of PCT/IB03/00086 01/15/2003				
<b>** FOREIGN APPLICATIONS *****</b> GERMANY 102-02-986.5 01/26/2002				
Foreign Priority claimed <input type="checkbox"/> yes <input type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after met Allowance Verified and Acknowledged <u>Examiner's Signature</u> <u>Initials</u>		<b>STATE OR COUNTRY</b> GERMANY	<b>SHEETS DRAWING</b> 2	<b>TOTAL CLAIMS</b> 6
<b>INDEPENDENT CLAIMS</b> 1				
<b>ADDRESS</b> 38107				
<b>TITLE</b> COIL SYSTEM FOR AN MR APPARATUS AND AN MR APPARATUS PROVIDED WITH SUCH A COIL SYSTEM				
<b>FILING FEE RECEIVED</b> 1220	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit	